## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F94000006283

Entity Name: HARVEST MEAT COMPANY, INC.

**Current Principal Place of Business:** 

1022 BAY MARINA DRIVE

#106

NATIONAL CITY, CA 91950

**Current Mailing Address:** 

1022 BAY MARINA DRIVE

#106

NATIONAL CITY, CA 91950 US

FEI Number: 33-0639136 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**FILED** May 19, 2020

**Secretary of State** 

5615027147CC

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name BABIKIAN, SHANT Name FRENCH, SCOT

Address 1022 BAY MARINA DRIVE Address 1022 BAY MARINA DRIVE #106

#106

NATIONAL CITY CA 91950 City-State-Zip: City-State-Zip: NATIONAL CITY CA 91950

Title **DIRECTOR** Title **DIRECTOR** 

BERGMANN, LEON AHMED, OSMAN Name Name

1022 BAY MARINA DRIVE 1022 BAY MARINA DRIVE Address Address

City-State-Zip: NATIONAL CITY CA 91950 City-State-Zip: NATIONAL CITY CA 91950

Title **DIRECTOR** Title DIRECTOR KASSAR, NAEL ISHBIA, EARL Name Name

1022 BAY MARINA DRIVE 1022 BAY MARINA DRIVE Address Address

#106

City-State-Zip: NATIONAL CITY CA 91950 City-State-Zip: NATIONAL CITY CA 91950

Title **DIRECTOR** Title **DIRECTOR** 

MORRISON, DALE Name Name MOREY, SANJAY

Address 1022 BAY MARINA DRIVE 1022 BAY MARINA DRIVE Address

City-State-Zip: NATIONAL CITY CA 91950 City-State-Zip: NATIONAL CITY CA 91950

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

05/19/2020 SIGNATURE: SARA GANGEL SECRETARY

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

#106

TREASURER AND CHIEF FINANCIAL OFFICER Title Title **SECRETARY** Name JORGENSEN, JOEL Name GANGEL, SARA

1022 BAY MARINA DRIVE Address 1022 BAY MARINA DRIVE Address #106 #106

City-State-Zip: NATIONAL CITY CA 91950 City-State-Zip: NATIONAL CITY CA 91950

CEO Title **PRESIDENT** Title

Name BERGER, KARL Name BERGMANN, LEON

Address 1022 BAY MARINA DRIVE Address 1022 BAY MARINA DRIVE

#106

City-State-Zip: NATIONAL CITY CA 91950 City-State-Zip: NATIONAL CITY CA 91950